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| Gender |
| Are you or have you ever considered yourself to be transgender? |
| Age Range |
| Ethnic Origin |
| Religion |
| Sexual Orientation |
| Do you care for dependants? |
| What was the postcode of the house you grew up in? |
| Did any of your parent(s) or guardian(s) complete a university degree course or equivalent (for example BA, BSc or higher)? |
| What type of school did you mainly attend between the ages of 11 and 16? |
| At any point during your school years, did you receive free school meals? |
| Do you consider yourself to have a physical or mental impairment or disability that has a substantial and long-term adverse effect on your ability to carry out normal day to day activities? |
| If yes, please give details: |